

MIRACLE ROOMS

FOUNDATION SCHOOL

CHAPTER NINE

The Healing Encounter

The Miracle Rooms Model – Ten Steps, and the Lines We Do Not Cross

“What do you want me to do for you?”

Mark 10:51

TRAINEE MANUAL · VOLUME FIVE

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9.0 Chapter Overview

Eight chapters of preparation arrive here. This chapter gives trainees the actual process they will use, the boundaries that make it safe, and the first full rehearsal of both.

What this chapter is, and is not

It is a simple, repeatable, teachable process that any ordinary believer can follow. That is the whole point — Chapter Two established that the ministry was given to unnamed, untrained people, and a process is how we keep it that way.

It is not a technique that produces healing. There is no such thing, and Chapter Two § 2.4.1 established that Jesus had no method.

The steps organise our love, our listening and our safety. They do not operate on God.

9.0.1 Learning outcomes

By the end of this session a trainee will be able to:

1. Recite the ten steps in order and state the purpose of each.
2. Run a complete encounter in a team of three, in role, within fifteen minutes.
3. State all seven non-negotiables from memory and explain why each exists.
4. Ask permission for touch correctly, and receive a refusal without altering their manner.
5. Check in after prayer using neutral, non-leading language.
6. Complete a consent and follow-up record correctly.
7. Explain what Männedorf demonstrates about rooms, ordinary people and multiplication.

9.0.2 Session plan

Time	Element	Reference	Lead
0:00–0:20	Worship and waiting	—	Worship lead
0:20–0:30	Report-back: the offering drill, one week on	Ch. 8 § 8.14	Team leaders
0:30–1:10	Teaching — the ten steps and the non-negotiables	§ 9.1–9.5	Teacher

Time	Element	Reference	Lead
1:10–1:25	Break	—	—
1:25–2:15	Activation — full role-play, observed	§ 9.12	Facilitator + trainers
2:15–2:25	Debrief in teams	App. 9B	Team leaders
2:25–2:30	Send-out and weekly practice	§ 9.13	Facilitator

Facilitator note

This session has the longest activation in the school and the shortest discussion. That is deliberate — the ten steps are learned by doing them badly a few times in a safe room, not by discussing them.

Every team must be observed by a trainer for at least one full encounter. If you do not have enough trainers, run fewer teams at a time rather than leaving any unobserved.

Expect the most common failures to be: praying before listening, forgetting to ask permission, and leading the check-in question. Correct all three in the moment.

9.1 Why Have a Model at All?

A fair objection, and trainees who have absorbed Chapter Two should raise it: if Jesus used no formula — touching one man, speaking from a distance to another, using mud, praying twice — why are we issuing a ten-step process?

Because the steps are not a method for producing healing. They are a method for producing a safe, unhurried, dignified encounter in which two other things can happen: the person is genuinely loved, and God is free to do whatever He chooses.

9.1.1 What the steps actually do

The step exists to...	Not to...
Make sure we listen before we pray	Guarantee an outcome
Make sure consent is asked and honoured	Make the prayer more effective
Make sure there is a pause for the Holy Spirit	Manufacture an atmosphere
Make sure the person is asked what they experienced, neutrally	Extract a testimony
Make sure nobody leaves carrying blame	Protect the team's reputation
Make sure someone follows up on Thursday	Create a client relationship

Every one of those is under our control. None of them is God's part. That distinction is the reason a structure is safe here — the moment a step is believed to cause the healing, it has become superstition and should be removed.

9.1.2 Precedent

There is good precedent for a simple teachable structure. James 5:13–16 is itself a procedure: the sick person calls, the elders come, they pray together, they anoint with oil. In the modern era, John Wimber's five-step prayer model was built for the same reason — so that ordinary church members, not specialists, could pray for people competently.

Our ten steps go further in two respects, deliberately: consent is an explicit step, and follow-up is an explicit step. Both exist because of failures documented elsewhere in this manual.

9.2 Before the Door Opens

9.2.1 The room

Requirement	Reason
Chairs arranged so the person is not encircled or cornered, with a clear path to the door	Nobody should feel physically enclosed, particularly people with a history of being controlled
A door that can be closed for privacy but is never locked	Confidentiality without confinement
A window or glass panel, or the door left ajar, where the room is used with a minor or a vulnerable adult	Safeguarding. See Chapter Twelve
Ordinary lighting	Dimmed lighting produces atmosphere, and atmosphere is not our business
Tissues, water, and a chair suitable for someone with limited mobility	Basic dignity
Quiet. Music, if any, instrumental and low	The person needs to be able to hear and be heard

9.2.2 The team of three, and who does what

Three is the standard. Never one, and never two where a team of three is possible.

Role	Responsibility
Lead	Welcomes, asks the questions, runs the steps, asks for consent, closes
Second	Prays, listens, may offer an impression once it has been weighed (Chapter Eight § 8.6)
Third – the watcher	Says little. Watches the person, watches the team, watches the time. Holds the safety of the encounter

The watcher role

This is a Miracle Rooms distinctive and it is not a junior position. The watcher is the person who notices that the encounter has run twenty-five minutes, that the person has become distressed, that a teammate is drifting towards a forbidden sentence, or that this needs to stop.

The watcher may interrupt at any time, and no one questions it in the room. Rotate the role so that everybody learns it.

9.2.3 The team's own preparation

1. Twenty minutes of worship and waiting before the first person is admitted — never skipped, however busy the evening.
2. Roles agreed aloud before the door opens.
3. Anyone unwell, exhausted or in crisis says so now and steps out. Chapter Four § 4.7 and the Chapter Twelve code both require this.
4. Phones away. Not on silent — away.

9.3 The Ten Steps

Learn them in order. A laminated card for the room is at Appendix 9A.

9.3.1 Step 1 – Welcome

Purpose: to make the person feel safe and to give them control of what is about to happen.

Do	Say something like
Introduce all three by name, and use theirs	"I'm Sarah, this is David and this is Amara. And you're Margaret – is that right?"
Say what will happen and how long it will take	"We'll have about fifteen minutes. We'll listen first, then we'll pray with you"
Say that they are in charge of it	"You can stop us at any point, for any reason, and that's completely fine"

Failure mode: launching into ministry warmly but without any of the above, so the person never learns that they are allowed to stop it.

9.3.2 Step 2 – Listen

Purpose: to find out what is actually going on, and to give the person the experience of being heard.

The opening question is always: "What would you like us to pray for?" Then listen – properly, in the sense trained in Chapter Seven. Ask the second question. Do not begin composing your prayer.

Do	Don't
Ask "Can you tell me more about that?" at least once	Interrupt with advice, a Scripture, or a similar story
Let a silence run	Fill it
Reflect back: "So what I'm hearing is... have I got that right?"	Assume you understood the first time
Notice what they say last – it is often the real thing	Act on the first sentence only

Failure mode: the most common failure in the entire model. The team prays for the presenting request and never hears the actual one.

9.3.3 Step 3 – Ask permission

Purpose: consent, explicitly given, before any contact.

The words, and the rules

“Would it be alright if one of us put a hand on your shoulder while we pray? It's completely fine if you'd rather we didn't.”

Shoulder, upper arm, or hands only. Never anywhere else, under any circumstances, for any reason.

A refusal changes nothing about the ministry and must produce no change in warmth, tone or length. If a trainee's manner alters after a no, that is a training issue and it is addressed the same evening.

Consent is asked again if the situation changes, and it can be withdrawn at any point.

9.3.4 Step 4 – Listen to the Holy Spirit

Purpose: to give God room before we start talking.

Pause. Ten to twenty seconds of silence, and it will feel much longer than that to a new team. Do not fill it with soft repetition of “Jesus” or with a running commentary. Silence in front of another person is a discipline and it is learned by practice.

If an impression comes, it is weighed with the team before it is spoken — Chapter Eight § 8.6, and Appendix 8B. If nothing comes, nothing comes. That is normal and is not reported as a deficiency.

9.3.5 Step 5 – Pray simply

Purpose: to ask God, plainly and specifically, for what this person needs.

Standard	From
Under thirty seconds	Chapter Six § 6.7 — the recorded words of Jesus and the apostles are two or three long
Conversational volume	Chapter Six § 6.7.2
Specific enough to be recognisable if answered	Chapter Five § 5.9.1
Ordinary English, no insider vocabulary	Chapter Six § 6.7.2
Addressed to God, or to the condition — and you know which	Chapter Six § 6.4.4
No preaching at the person under cover of prayer	Chapter Six § 6.5

Failure mode: the long prayer. It almost always serves the team rather than the person, and its length is usually a symptom of uncertainty.

9.3.6 Step 6 – Check

Purpose: to find out what, if anything, the person is experiencing — without telling them what to say.

Ask	Never ask
“What are you noticing, if anything?”	“Do you feel the heat in your hands?”
“How's that feeling now?”	“The pain's gone, hasn't it?”

Ask	Never ask
"Anything at all, or nothing?"	"Can you try standing on it now?" (see § 9.4)

The phrase "or nothing" matters more than it looks. It gives explicit permission for the honest answer, and without it people routinely invent a small sensation to be polite. A room that only ever hears positive answers has trained its visitors to lie to it.

9.3.7 Step 7 – Pray again if appropriate

Jesus prayed twice for the blind man at Bethsaida, and after the first prayer his sight was only partial (Mark 8:22–25). Praying again is biblical and it is not unbelief — Chapter Two § 2.5 dealt with the contrary teaching.

The rules for repeat prayer

Ask permission each time: "Would you like us to pray once more?"

Two or three rounds is normal. Beyond that, you are applying pressure, whatever your intention.

Never continue because stopping feels like giving up. That is about you.

If the person seems to be enduring it rather than wanting it, stop and move to Step 8.

9.3.8 Step 8 – Thank Jesus

Every time. Whatever happened or did not happen. Short.

This step exists to place the encounter where it belongs before anyone starts evaluating it, and it protects the team from the emotional whiplash of measuring an evening by outcomes.

9.3.9 Step 9 – Encourage

Purpose: to make sure the person leaves with their dignity intact and without blame, whatever the result.

Situation	What to say
Something has visibly changed	“That's wonderful — let's thank Jesus. And please do go back to your doctor and have it checked; that's the right next step.” (Mark 1:44)
Nothing has changed	“Thank you for letting us pray with you. Nothing has shifted that we can see today, and that is not on you — there's no condemnation here at all. We'll keep praying for you this week.”
The person is disappointed or upset	Do not rush them out. Sit with it. Chapter Eleven is the full treatment of this moment

Never send anyone away with an explanation of why nothing happened. We do not have one, and the ones people invent are the exact injuries catalogued in Chapters Five and Eight.

9.3.10 Step 10 – Follow up

Purpose: so that a person is not treated as an event.

Record consented contact details on the form at Appendix 9C, and make contact within the week. This is a Miracle Rooms distinctive and it is the step most likely to be quietly dropped when a room gets busy. Do not let it be.

Why this is a step and not an optional extra

Chapter One: because God is abounding in steadfast love, our room is committed – people are not events.

The follow-up call is frequently where the real ministry happens. It is also the only mechanism by which a room ever finds out whether anything actually lasted.

And it is a safeguarding function: a person who was distressed, or who disclosed something concerning, is checked on by a named person.

9.4 The Non-Negotiables

Seven. Learn them exactly. They are assessed, and a breach is treated as a serious matter regardless of intention or outcome.

#	Non-negotiable
1	Always a team of three. Never one-to-one, in any circumstance.
2	Permission before any touch. Shoulder, upper arm or hands only. A refusal changes nothing.
3	Never contradict, override or comment on medical advice. Never tell anyone to stop, reduce, delay or skip treatment, an appointment, or a medication.
4	Never remove or encourage the removal of a brace, splint, support, oxygen, dressing or any medical device.
5	Never guarantee an outcome, and never attach a date.
6	No photography, filming, recording, or public naming without prior written consent.
7	Anyone may stop the ministry at any moment, for any reason, without explanation.

9.4.1 Why number four is stated separately

It could have been folded into number three. It is separate because of a documented death.

Chapter One recorded the case investigated by the surgeon William Nolen, who followed up twenty-three people presented as healed at a Kathryn Kuhlman service. Among them was a woman with cancer in her spine who removed her brace at Kuhlman's encouragement and walked across the stage. Her spine collapsed the following day. She died some months later.

This is why we never ask anyone to demonstrate

“Try it now.” “Stand up and see.” “Take it off and walk.” None of these is ever said in a Miracle Room.

Demonstration serves the room's confidence, not the person's welfare. It carries a physical risk that we are unqualified to assess, and it creates enormous pressure on the person to produce a result in front of an audience.

If a person spontaneously wants to test something, that is their decision — and our response is still: please have it checked properly before you rely on it.

9.4.2 The escalation rules

If...	Then...
A person discloses suicidal thoughts, self-harm, or not wanting to be alive	Stay with them. Do not leave them alone. Involve the duty leader immediately. Do not simply pray and send them home
A person discloses abuse, violence, or risk to a child or vulnerable adult	Duty leader immediately. Mandatory reporting obligations apply and are followed without exception
A person appears intoxicated, or is in acute mental health crisis	Do not proceed with ministry. Care for them, involve the duty leader
A person says God told them to stop treatment	Do not affirm it, do not argue theology. “That's a conversation for you and your doctor.” Tell the duty leader
A person becomes distressed beyond what the team can hold	The watcher stops the encounter. Duty leader
A team member breaches a non-negotiable	The watcher stops the encounter. Report the same evening — not later

9.5 Timing and Pacing

Element	Standard
Whole encounter	Fifteen minutes as a working norm; twenty-five as a hard ceiling before the watcher intervenes
Listening (Step 2)	At least a third of the total. If you have listened for two minutes and prayed for eight, it is the wrong way round
Each prayer (Step 5)	Under thirty seconds
Rounds of prayer	Two or three. Not more
Encounters per team per session	Capped by leadership, never by demand
Gap between encounters	At least five minutes, for the team to debrief and reset

Chapter Seven established that a Miracle Room is not a production line. If the caps mean fewer people are seen in an evening, fewer people are seen. A team that believes it is being judged on throughput will process people no matter what its theology says.

9.6 Follow-Up

9.6.1 How it works

1. Consent is recorded at Step 10 — explicitly, in writing, with the person choosing whether they want contact and by what means.
2. A named team member owns the follow-up. Not “the team”; a person, by name, on the form.
3. Contact within seven days.
4. The call is short and it is not an audit. “We’ve been praying for you this week and just wanted to see how you’re going.”
5. If there is no answer, one further attempt, and then it stops. Follow-up must never become pursuit.
6. Outcome recorded on the log — including no change, which is the outcome most rooms fail to record.

9.6.2 What follow-up is not

Not	Because
A testimony-gathering exercise	The person can hear the hope in your voice and will shape their answer to it
An invitation pipeline	They came for prayer, not to be recruited
Open-ended pastoral care	We are not their pastor, their counsellor or their friend by default. Refer, don't absorb
Repeated contact	Two attempts maximum. Their silence is an answer

9.7 Records, Consent and Confidentiality

1. Record the minimum necessary: name, contact if consented, the request in a sentence, who prayed, the date, follow-up owner and outcome.
2. Never record medical detail beyond what the person volunteered as the prayer request, and never record a diagnosis or speculation.
3. Records are kept securely, access limited to named leaders, and destroyed according to your retention policy.
4. What is said in the room stays in the room — except where a mandatory reporting obligation applies, and the person should be told this at the point of any disclosure that triggers it.
5. No testimony is shared publicly — in a meeting, a newsletter, or online — without specific written consent, and consent for one use is not consent for another.

9.8 From History: Männedorf, and the Room Rather Than the Platform

The Miracle Rooms model — a room, a team, ordinary believers, no platform — is not new. It is older than Pentecostalism, and its clearest early example is a Swiss silk-weaver.

9.8.1 Dorothea Trudel

Dorothea Trudel (1813–1862) was born into poor circumstances in a hamlet near Hombrechtikon in the canton of Zürich. She attended school for four years. She earned her living weaving silk, and was confirmed in the Reformed Church.

Her ministry began accidentally. Several co-workers at the florist's where she worked became seriously ill and did not recover under medical treatment. Trudel considered James 5 — the passage in Chapter Five § 5.3 — and decided to pray for them with the laying on of hands. They recovered.

When an epidemic swept Switzerland in 1851 she was overwhelmed with people seeking prayer, and she responded by opening houses in Männedorf where the sick could come and stay. Together with the German pastor Johann Christoph Blumhardt, she is regarded by historians as a forerunner of the whole modern divine healing movement.

9.8.2 Why this is the model for our chapter

What Trudel did	What we take
She built rooms and houses, not a platform. People came to a place and were cared for there	The entire premise of Miracle Rooms. A room within reach of every neighbourhood, not a circuit of meetings
She worked from James 5 — prayer and laying on of hands, in an ordinary domestic setting	§ 9.1.2. The structure is biblical and unglamorous
She was an uneducated working woman with four years of schooling	Chapter Two's seventy-two, in the nineteenth century. No credentials required
She deliberately trained successors. Anna Barbara Meili, a farm woman, learned from her directly; Trudel commissioned her to lead devotional classes, and after time at Männedorf Meili began taking in the sick herself	Multiplication by apprenticeship — exactly the pathway in this school. She taught people to do what she did

What Trudel did	What we take
Samuel Zeller continued the work after her death. In 1867 he prayed for Otto Stockmayer, who was healed of a long-standing condition and later opened a faith home of his own at Hauptweil	The model reproduced itself into new rooms in new places. This is the Miracle Rooms multiplication value working over generations

9.8.3 What became of it

Trudel's work was made known in America by Charles Cullis (1833–1892), and through him it reached W. E. Boardman, A. B. Simpson and A. J. Gordon – most of whom went on to establish healing homes of their own. The institution at Männedorf itself continues today as the Bibelheim Männedorf, more than a century and a half after her death.

The contrast worth naming

Chapter Six ended with a movement that hardened around one man and preserved him. This chapter ends with a movement that reproduced a practice and outlived the woman who started it – by more than a hundred and sixty years.

The difference is what was multiplied. Branham's followers multiplied a person. Trudel multiplied a room, a method and a set of trained ordinary people.

That is the choice every healing ministry eventually makes, usually without noticing.

9.9 Why Each Non-Negotiable Exists

None of these is precautionary theory. Each traces to a documented failure, most of them already in this manual.

Non-negotiable	Where it comes from
1. Teams of three	James 5:14 — elders, plural. And every safeguarding framework in existence: one-to-one ministry is where both abuse and false allegation occur
2. Permission before touch	Chapter Twelve's code, Australian safeguarding practice, and the plain fact that many people in your room have histories that make unexpected contact frightening
3. Never override medical advice	Chapter Five § 5.8.3. Wigglesworth's refused surgery and years of pain (Chapter Two). The recurring pattern across the whole tradition
4. Never remove a support or device	The woman whose spine collapsed after removing her brace (Chapter One § 1.10.1). This rule is written in one person's death
5. Never guarantee, never date	Chapter Five § 5.1.1 and Chapter Eight § 8.9.2. A promise God did not make becomes the person's fault when it fails
6. No recording or naming without consent	Chapter One: the temptation to convert people's worst moments into promotional material is real and it is not new
7. Anyone may stop, any time	Chapter Six § 6.5 — authority is never over people. The person retains every decision, as Paul did with Agabus

How to hold these

A trainee who experiences the non-negotiables as restrictions on faith has misunderstood them.

They are the reason a frightened person can walk into your room at all. Everything we are permitted to do rests on them.

9.10 What This Means for a Miracle Room

Because...	Our room is...
The steps organise love and safety, not outcomes	Structured without being mechanical
Listening is at least a third of the encounter	Slow at the start, every time
Consent is an explicit step	Asking before touching, and unchanged by a no
Step 4 is a genuine pause	Comfortable with silence in front of another person
Prayers are under thirty seconds	Quiet. Nothing is achieved by volume or length
The check-in offers “or nothing”	Honest. We would rather hear the truth than a kind answer
Nobody leaves carrying blame	Safe to be unhealed in
Follow-up is a step, not an extra	Committed. People are not events
Trudel built rooms and trained successors	Multiplying a practice, not a personality

9.11 Table Discussion

Groups of three or four. Fifteen minutes only — the activation is the priority tonight.

1. Which step do you expect to find hardest, and why?
2. Step 6 includes the words “or nothing”. What happens in a room that never says them?
3. Non-negotiable four exists because a woman died. Does knowing that change how you hold it?
4. Follow-up is the step most likely to be dropped when a room gets busy. What would stop that happening here?
5. Trudel multiplied a practice; other movements multiplied a person. Which is our room currently set up to do?

9.12 Activation – The Full Encounter

Fifty minutes. This is the longest and most important exercise in the school.

9.12.1 Format

1. Teams of three, plus one trainer observing with Appendix 9B.
2. A fourth person plays the visitor, using a scenario card. Trainees rotate through all four roles.
3. Full encounter, all ten steps, fifteen minutes maximum.
4. The trainer does not intervene except where a non-negotiable is breached – in which case they stop it immediately and say why.
5. Debrief of five minutes after each round, using the observation sheet.

9.12.2 Scenario cards

Card	The visitor	What it tests
A	Chronic back pain, six years, has been prayed for many times before	Listening past the presenting request; encouraging without over-promising
B	Declines to be touched	Step 3, and whether the team's warmth changes after a no
C	Says nothing has changed when asked at Step 6	Step 9 – removing blame, not explaining
D	Asks partway through whether they should stop their medication	Non-negotiable 3, and the exact words of the reply
E	Becomes tearful in the second minute and stops speaking	Pacing, the watcher's role, and not rushing to pray over distress
F	Wants to be prayed for a fourth and fifth time	Step 7's ceiling, and declining kindly
G	Mentions in passing that they sometimes feel there is no point being here	Escalation. The team must recognise it, stay with them, and involve the duty leader

Card G is compulsory

Every trainee encounters card G at least once before the end of the school.

A trainee who prays for card G and sends them home has failed the exercise, and this is explained plainly rather than softened. The correct response is to stay with the person, not leave them alone, and involve the duty leader – as § 9.4.2 requires.

9.12.3 Facilitator pre-session checklist

- ☐ Appendix 9A printed and laminated – one per practice room
- ☐ Appendix 9B printed – four per trainee
- ☐ Appendix 9C printed – two per team
- ☐ Scenario cards A–G prepared; card G allocated to every team at least once
- ☐ One trainer per team; run fewer teams simultaneously rather than leaving any unobserved
- ☐ Timers available – fifteen-minute ceiling enforced
- ☐ Duty leader identified and introduced by name, since teams will be practising escalating to them
- ☐ Trainers briefed to stop an encounter immediately on any non-negotiable breach
- ☐ Debrief time protected – five minutes per round, not skipped to fit another round in

9.13 This Week's Practice

1. Learn the ten steps by heart, in order. You should be able to write them out.
2. Learn the seven non-negotiables by heart.
3. Learn the Step 3 permission sentence and the Step 9 “nothing has changed” response word for word.
4. Practise the Step 6 check-in on someone this week in an ordinary setting — ask a neutral question and resist leading the answer.
5. Written, half a page: which non-negotiable will be hardest for me to keep under pressure, and what will I do about it?
6. Continue your rule of life, listening journal and team contact.

9.14 Sources and Further Reading

9.14.1 Scripture

Mark 1:40–45; 8:22–25; 10:46–52; Luke 8:40–56; James 5:13–16; Acts 3.

9.14.2 On models of prayer ministry

John Wimber's five-step model, set out in *Power Healing* (1986) and in Vineyard training material, is the best-known modern structure and is worth reading alongside ours.

9.14.3 On Männedorf

Dorothea Trudel's life and the Männedorf houses are documented in nineteenth-century accounts — including the contemporary volume *Dorothea Trudel; or, The Prayer of Faith* — and in modern scholarship on the divine healing movement, including work on the transfer of practice from Trudel to Anna Barbara Meili. Her influence on the American healing movement runs through Charles Cullis to Boardman, Simpson and Gordon.

9.14.4 Standing instruction

At the end of every shift, ask the team one question: did we do the ten steps, or did we do the ones we like?

Appendix 9A – The Ten Steps (lamine for the room)

#	Step	The words
1	Welcome	"There are three of us and we'll take about fifteen minutes. You can stop us at any time."
2	Listen	"What would you like us to pray for?" – then: "Can you tell me more about that?"
3	Ask permission	"Would it be alright if I put a hand on your shoulder? It's fine if you'd rather I didn't."
4	Listen to the Spirit	Pause. Ten to twenty seconds. Do not fill it.
5	Pray simply	Under thirty seconds. Ordinary volume. Ask for the specific thing.
6	Check	"What are you noticing – anything at all, or nothing?"
7	Pray again if appropriate	"Would you like us to pray once more?" Two or three rounds. Not more.
8	Thank Jesus	Every time, whatever happened.
9	Encourage	"Nothing has shifted that we can see today, and that is not on you. No condemnation here at all."
10	Follow up	Record consent. Named owner. Contact within seven days.

THE SEVEN NON-NEGOTIABLES

1. Always three. Never one-to-one.
2. Permission before touch — shoulder, upper arm, hands only. A no changes nothing.
3. Never override medical advice. Never tell anyone to stop, reduce or delay treatment.
4. Never remove or encourage removal of a brace, support, device or dressing. Never say “try it now”.
5. Never guarantee an outcome. Never attach a date.
6. No recording, filming or public naming without written consent.
7. Anyone may stop at any moment, for any reason, without explanation.

Appendix 9B – Encounter Observation Sheet

One per observed encounter. Two satisfactory sheets are required for graduation.

Trainee: **Role:** Lead / Second / Watcher **Observer:**

Date:

Step	Done?	Note
1 Welcomed; named; explained; gave permission to stop		
2 Asked the opening question and listened		
2 Asked a second question		
2 Reflected back before praying		
3 Asked permission before touch, in the correct form		
4 Paused genuinely before praying		
5 Prayer under 30 seconds, ordinary volume, specific		
6 Checked in neutrally, including “or nothing”		
7 Asked before praying again; stopped at three rounds		
8 Thanked Jesus		
9 Encouraged; removed blame; no explanation offered		
10 Consent recorded; follow-up owner named		

Non-negotiable breaches (any breach = not satisfactory)	Y / N
Ministered without a team of three	

Non-negotiable breaches (any breach = not satisfactory)	Y / N
Touched without permission, or touched elsewhere than shoulder/arm/hands	
Commented on, contradicted or overrode medical advice	
Suggested removing a device, or said “try it now”	
Guaranteed an outcome or gave a date	
Recorded or named without consent	
Continued after the person indicated they wanted to stop	
Used forbidden language – diagnosis, sin-naming, direction, dates (Ch. 8 § 8.9.2)	
Failed to escalate a disclosure requiring the duty leader	

Outcome: Satisfactory / Repeat required Observer signature:

Appendix 9C – Consent and Follow-Up Log

Completed at Step 10. Stored securely. Access limited to named leaders.

Field	Entry
Date and room	
Name	
Prayer request (one sentence, in their words)	
Team members present	
Consent to be contacted? YES / NO	
Preferred method and details (only if YES)	
Consent to share testimony publicly? YES / NO / NOT DISCUSSED	
Follow-up owner (named person)	
Contact made – date	
Outcome reported (including 'no change')	
Referral made? To whom?	
Duty leader involved? Reason	

Recording standards

Minimum necessary information only. No diagnoses, no speculation, no medical detail beyond what the person volunteered.

Record 'no change' as faithfully as you record a healing. A log that contains only good outcomes is not a record; it is advertising.

Consent for follow-up is not consent to share. Ask separately, in writing, and never assume.

Appendix 9D – Trainee Self-Check

Complete before Chapter Ten. Not collected, not marked.

- ☐ I can write out the ten steps in order from memory
- ☐ I can state all seven non-negotiables from memory
- ☐ I can explain why the steps are not a technique for producing healing
- ☐ I can say the Step 3 permission sentence exactly, and I know what a no does not change
- ☐ I can pause for fifteen seconds in front of another person without filling it
- ☐ I can check in without leading the answer, and I include “or nothing”
- ☐ I can say the Step 9 no-change response word for word
- ☐ I know why non-negotiable four is stated separately
- ☐ I know what to do with card G, and I know it is not to pray and send them home
- ☐ I can complete a consent and follow-up log correctly
- ☐ I have been observed in a full encounter and read my observation sheet

Chapter Nine – Summary Card

Retain and review

The steps organise our love, our listening and our safety. They do not operate on God.

Welcome · Listen · Ask permission · Listen to the Spirit · Pray simply · Check · Pray again · Thank Jesus · Encourage · Follow up.

Listening is at least a third of the encounter. The most common failure in the model is praying for the presenting request and never hearing the real one.

A refusal of touch changes nothing — not the warmth, not the tone, not the length.

“Anything at all, or nothing?” A room that only hears good answers has taught its visitors to be polite.

Two or three rounds of prayer. Beyond that is pressure, whatever you intend.

Never say “try it now”. Non-negotiable four is written in one woman's death.

Nobody leaves carrying blame, and nobody leaves with an explanation we do not have.

Follow-up is a step, not an extra. People are not events.

Trudel, a silk-weaver with four years of schooling, read James 5, prayed, opened houses, and trained her successors. The rooms outlived her by more than a century and a half.

Multiply a practice, not a personality.

End of Chapter Nine